



Department of Medical Assistance Services  
600 East Broad Street, Suite 1300  
Richmond, Virginia 23219

[www.dmas.virginia.gov](http://www.dmas.virginia.gov)

# MEDICAID PROVIDER MANUAL UPDATE

**TO:** All Providers of Community Mental Health Rehabilitative Services Participating in the Virginia Medical Assistance Program and Managed Care Organizations

**FROM:** Cynthia B Jones, Acting Director  
Department of Medical Assistance Services (DMAS)

**MEMO:** Update

**DATE:** July 19, 2010

**SUBJECT:** Update to Community Mental Health Rehabilitative Services Provider Manual

The purpose of this memorandum is to notify you of changes to Chapters II, IV, V, VI, Appendix C, and the addition of Appendix D of your Community Mental Health Rehabilitative Services Provider Manual. Please download the new pages to insert into your Provider Manual and retain the attached table. The attached table shows the changes to the manual.

## **Amendments to Chapter II**

- Provides notification of DMAS marketing requirements.

## **Amendments to Chapter IV**

- Provides clarification on changes for Intensive In-Home services (IIH).
- Provides clarification on changes for Therapeutic Day Treatment for Children and Adolescents
- Provides clarification on changes for Community-Based Residential Services for Children and Adolescents Under 21- Level A (H2022 HW (CSA); H2022 HK (Non-CSA)) and Therapeutic Behavioral Services - Level B (H2020 HW (CSA); H2020 HK (Non-CSA))
- Provides clarification on changes for Mental Health Support Services

## **Amendments to Chapter V**

- Provides clarification on special billing issues for Intensive In-Home services

## **Amendments to Chapter VI**

- Provides information on DMAS Mental Health Utilization Review

### **Amendments to Appendix C**

- Provides information on changes pertaining to when to request prior authorization process for Intensive In-Home services.

### **Appendix D**

- Provides specific information on marketing guidelines for all CMHRS services.

Please review these changes carefully.

### **REQUESTS FOR DUPLICATE REMITTANCE ADVICES**

In an effort to reduce operating expenditures, requests for duplicate provider remittance advices will no longer be printed and mailed free of charge. Duplicate remittance advices will be processed and sent via secure email. A processing fee for generating duplicate paper remittance advices will be applied to paper requests, effective July 1, 2009.

### **ELIGIBILITY VENDORS**

DMAS has contracts with the following eligibility verification vendors offering internet real-time, batch and/or integrated platforms. Eligibility details such as eligibility status, third party liability, and service limits for many service types and procedures are available. For more information on the services that are offered, contact the vendors. Contact information for each of the vendors is listed below.

Passport Health Communications, Inc. <a href="http://www.passporthealth.com">www.passporthealth.com</a> <a href="mailto:sales@passporthealth.com">sales@passporthealth.com</a> Telephone: 1 (888) 661-5657	SIEMENS Medical Solutions – Health Services Foundation Enterprise Systems/HDX <a href="http://www.hdx.com">www.hdx.com</a> Telephone: 1 (610) 219-2322	Emdeon <a href="http://www.emdeon.com">www.emdeon.com</a> Telephone: 1 (877) 363-3666
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### **COPIES OF MANUALS**

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at [www.dmas.virginia.gov](http://www.dmas.virginia.gov). Refer to the “DMAS Content Menu” column on the left-hand side of the DMAS web page for the “Provider Services” link, which takes you to the “Manuals, Memos and Communications” link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates that are requested.

### **“HELPLINE”**

The “HELPLINE” is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The “HELPLINE” numbers are:

1-804-786-6273 Richmond area and out-of-state long distance  
1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the “HELPLINE” is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

**Attached Number of Pages: (1)**

***COMMUNITY MENTAL HEALTH REHABILITATIVE SERVICES  
PROVIDER MANUAL***

**REVISION CHART  
July 19, 2010**

**SUMMARY OF REVISIONS**

<b>MANUAL SECTION</b>	<b>MATERIAL REVISED</b>	<b>NEW PAGE NUMBER(S)</b>	<b>REVISED PAGE(S)</b>	<b>REVISION DATE</b>
Chapter II	Chapter II		Entire Chapter	7/19/2010
Chapter IV	Chapter IV		Entire Chapter	7/19/2010
Chapter V	Chapter V		Entire Chapter	7/19/2010
Chapter VI	Chapter VI		Entire Chapter	7/19/2010
Appendix C	Appendix C		Entire Appendix	7/19/2010

**FILING INSTRUCTIONS**

<b>MANUAL SECTION</b>	<b>DISCARD</b>	<b>INSERT</b>	<b>OTHER INSTRUCTIONS</b>
Chapter II	Old Chapter II	New Chapter II	
Chapter IV	Old Chapter IV	New Chapter IV	
Chapter V	Old Chapter V	New Chapter V	
Chapter VI	Old Chapter VI	New Chapter VI	
Appendix C	Old Appendix C	New Appendix C	
Appendix D		New Appendix D	